

Article title: Pragmatic study of a thromboprophylaxis algorithm in critically ill patients with sars-cov-2 infection

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Treatment

Belgium has a scientific institution (ScienSano) that provides doctors with information to guide decisions in the health field. In its provisional guidance dated March 31, 2020 and updated on April 07, 2020 [24], the task force failed to recommend systematic early treatment with antivirals, corticosteroids, and convalescent plasma. However, in case of confirmed COVID-19 and critical disease, hydroxychloroquine (Plaquenil™) could be considered. The management of patients in our ICU was standardized for all patients and the drug was used crushed in the nasogastric tube, if there were no contraindications (400 mg at diagnosis, 400 mg 12 h later followed by 200 mg b.i.d. up to Day 5). However, since the clinical efficacy of hydroxychloroquine was not reported, caution was required in severe cases with cardiac, kidney, or liver failure, and contraindications in such situations were mandatory in our ICU. No patient received compassionate treatment (i.e. antivirals, monoclonal antibodies or intravenous immunoglobulin...).